

classify organic. And the classification is now based on state. So, it really does depend -- I mean, organic is certainly much better -- you're going to get a higher concentration of nourishment from organic, but it really does depend from state to state. I know in California we've tested the vegetation content organic and it's no different. Question.

Q: (inaudible)

GUERRERO: No side effects, no complications. The only side effect that you may experience is that if somebody is really toxic and they start to -- and they take it, they might experience flu-like symptoms for a couple days. Because as the body changes its physiology from an acid base to an alkaline base, you may feel a little achy; you might have a runny nose; you might feel a little flu-like symptoms for a couple of days. But it works great. It's got a lot of fiber, so it's great for people who have constipation. Which is, you know, a number one issue in all degenerative diseases anyway, the way people feel terrible is because they're full of (laughter). Question.

Q: All right. So we knew you recommend an alkaline diet. What types of foods are you talking about an alkaline diet? Because if you --

GUERRERO: Alkaline foods would be more water-based foods,

right? So fresh fruits and vegetables.

Q: Right. Do you recommend that (inaudible) stuff like that?
Or do you go for more like the protein (inaudible)?

GUERRERO: It depends on the type of protein. It depends on the type of protein. But you certainly can have meats and simple carbohydrates rather than complex carbs. So if you have like, you know, chicken and salad or chicken and vegetables -- those are simple carbs. So your body is going to burn the fat from the protein for fuel and then you don't have the fermentation from complex carbs.

Q: (inaudible)

GUERRERO: You can take it in the morning; you can take it in the afternoon, the evening. Our recommendation really is -- is to maintain nourishment throughout the day. So the idea of nourishment is less more often, is more than more less often.

(overlapping dialogue; inaudible)

GUERRERO: What's that? I'm sorry.

(inaudible)

You can mix it with juice, yeah. But ideally, you want to just mix it with water, because juice is what? Acidic.

Q: When do we start selling it? (laughter)

GUERRERO: I don't know. You're asking the wrong guy.

(laughter) Question.

Q: How safe is this for a pregnant woman?

GUERRERO: It's great for pregnant women. My wife took it through all of our pregnancies. I gave it to my children. I put a quarter of a teaspoon in their bowl when they were beginning -- when my wife was weaning and they were bottle fed. I put a quarter teaspoon in their bottle -- in their baby formula and they'd take it. It's great; they have animals take it. So it's wonderful for the kids.

Q: What's the difference between the Supreme Greens product and the product that you go to GNC and pick up (inaudible)?

GUERRERO: I think the difference there is that usually in all those other greens products what you find are sweeteners to make them taste better. So they're going to add like apple pectin, fruit pectin, your natural flavorings, just to sweeten them up and make them taste a little bit better. And the enzymes in fruits and the enzymes in vegetables are like the Hatfields and the McCoys. They can't stand each other and they cancel each other out. So you never combine fruit with anything. If you're going to eat fruit, you eat fruit by itself. And that's why -- that's really what makes the difference between the supreme greens with MSM and other greens is that we don't add any fruit in it at all.

Q: (inaudible)

GUERRERO: The MSM simply maintains the life force of the greens. Because when you pick a nutrient over time it loses its energetic value. And your body is electrical. So really your nourishment comes by how much energy it's able to provide. So the MSM makes sure that we can maintain a 250 megahertz vibration with inside all the nutrients that's there. And inside the Supreme Greens -- they're all organically grown; we don't allow the --
(end of side 1)

GUERRERO: ... for places that they don't allow for pesticide spraying, or herbicides. So, there's no pesticides or herbicides in the formula at all. Are there any other questions?

Q: (inaudible) (too far from microphone)

GUERRERO: They're actually not freeze-dried. Because in freeze-drying, you actually extract a lot of the enzymes, when you freeze-dry. The supreme ingredients are not freeze-dried. That's actually processed through what they call a micro-filtration process -- over and over and over. And, it becomes collodialized, or in these small particles. So, when you ingest it, it bypasses your liver, and it doesn't even have to break it down. It's already done it for it. OK? So, the particles are very, very small.

And what's so nice about that, is that hard, mucosal barrier around the cell? It's still porous, and so, we have broken the particles down small enough so that they can pass through the pores of that mucous and still get in the cell and do its function of nourishing a cell and breaking off, you know, that mucous plaque.

Q: So the powder and the capsules are actually a better absorption rate than a liquid, I guess, is good.

GUERRERO: Well, the powder is a liquid, because you mix it with water.

Q: OK. But it is mixing a little of the particles in there?
(inaudible)

GUERRERO: Yeah. And it might be a little grainy at the bottom, but -- that's really insignificant. But the particle sizes really are - through its micro-filtration process, is broken down, broken down, broken down, broken down, broken down, broken down - until they are in that fine powder.

Q: (inaudible)

GUERRERO: Where else would you find it?

Q: (inaudible)

GUERRERO: Natural. I mean, you can get MSN from a store. You know, they sell MSN in single amounts. I've got 3,000 milligrams per teaspoon of MSN in the grains.

Q: (inaudible)

GUERRERO: What, the MSN?

Q: Yes.

GUERRERO: Well, the MSN comes from -- it's richest source are plants that are nearest the ocean. So, you know, for example, like you've heard about grape seed extract? Or your maritime pine, right? Your OPC? Your pignagenau (sp?) You've probably heard about those, OK? What makes those effective is MSN. If you extract the MSN and their nutrient value is nothing.

Q: (inaudible)

GUERRERO: Kelp?

Q: (laughter)

GUERRERO: (laughter) Kelp is good, but I did not add kelp in there because most of my -- a lot of my patients are end-stage, and it is very difficult to find you know, pure kelp. Yes, stuff that hasn't been tainted.

Q: (inaudible)

GUERRERO: In a fido-nutrient based? That's a great question. And, in a fido-nutrient-based product, the FDA doesn't require us to write those on there. And they wouldn't fit on the list -- on the label anyway. But, it really is -- it's a whole food.

Q: (inaudible)

GUERRERO: Right. I mean, but it is a great question, because

people would say "Well, how much Vitamin A am I getting?"
Or, "How much Vitamin E, or how much you know?" "How
much..."

Q: (inaudible)

GUERRERO: Right.

Q: (inaudible)

GUERRERO: What?

Q: Well, how would you explain that to somebody calling in?
And it doesn't say definitely "Vitamins" on the bottom.
(inaudible)

GUERRERO: Right.

Q: And I'm talking about certain vitamins too. (inaudible)

GUERRERO: Well, Vitamin absorption is based on recommended daily
allowance. So where they say -- so, I don't know -- so, I
don't follow the recommended daily allowance guidelines.
I mean, I have some patients that are taking up to 40,000
milligrams of Vitamin D. So it just, it depends. And you
know, and then certainly every case is different.

Q: You liked my example?

GUERRERO: (laughter) Right, yes, yes. But, I would say, you
know, for your questions -- like, right now, my formulas
are distributed in 16 countries. And that question has
come up, and I really haven't come up with a great answer
for it yet. Because the reality of it is that you don't

know exactly what, or how much of it, because each batch is going to change. For example, because again, we are dealing with the vibrational frequency of the nutrient. So, if each batch is fresh, I may get a higher vibrational frequency from the carrots in one batch, than I got from the last batch. So, that vitamin content is going to be different. I think, you know, the best answer that I've come up with, is that, you know -- they're all organically grown, plant-based that have, you know, just your plant-based amino acids, proteins, vitamins, minerals. And the vitamin content isn't really going to be the same with each batch, because each batch is different.

Q: (inaudible)

GUERRERO: Do I need a multi-vitamin? Yeah. And I would say, yes. Yes, and I would say, yes, absolutely.

(laughter)

GUERRERO: Let me sell you one. I think you'd get an extra three bucks, right?

(laughter)

GUERRERO: So, but yeah. I would definitely sell them a multi-vitamin. If that is the issue, I would put them on a multi-vitamin, because the way the body breaks multi-vitamins down, it is really only going to absorb so much and the rest is going to urinate out anyway. So what the

body doesn't need - -so if the body isn't starving for colane, or it isn't starting for manganese, it is just not going to absorb it, because it doesn't need it. And it'll just go right out through the urine anyway. But it gives them peace of mind.

Q: Is that a place for all the nutrients and minerals and what-have? Because we had a lot of customers call up and say "I don't want to get too much "C" or "A", or --

GUERRERO: Absolutely.

Q: I just never knew that before.

GUERRERO: It really is the truth.

(laughter)

Q: Oh, no.

GUERRERO: You only have a couple of toxic vitamins.

Q: Right.

GUERRERO: And so, A, is going to be toxic.

Q: OK.

GUERRERO: Depending upon in your quantities. But your quantities in a fido-nutrient-based formula? Too small to make a difference. OK?

Q: (inaudible)

GUERRERO: Oh, that a ginger-root powder, so it will certainly help those that have nausea - -you know, that have enzyme deficiencies where they have excess acid production. SO

you'll actually notice a difference. There's physiologic changes within 7 to 10 days.

Q: OK.

GUERRERO: OK? In a condition that's that degenerative. If someone was calling you and saying, you know? I just need a lift in the afternoon. Man, I go to lunch. I come to the office, and my boss is complaining. I'm falling asleep at my computer. I need a lift. They will notice that -- I mean, within probably two or three days, because of the amount of chlorophyll and oxygen that's now providing -- and basically what is happening, is that when they're falling asleep -- what they really are is drunk. OK?

Q: Wow.

GUERRERO: Because remember, I talked about how the body breaks down -- carbohydrates breaks down in the form of acetyl aldehyde, and that's alcohol. And what happens is that the body can't metabolize it.

Q: (inaudible)

GUERRERO: Or if you're doing the tea-bags, you -- well, let's say your tea-bags,

Q: Yes.

GUERRERO: Right? Which would be ideal, because you can put the tea-bags in the same drink you're putting the greens in,

OK?

Q: Sure.

GUERRERO: OK? So you don't need the cool Calcium if you've got the tea-bags, right?

Q: Right.

GUERRERO: It's the same thing. So, you've got your tea-bags, and you've got your supreme greens, and you've got you -- essential, whatever they are -- which is a liquid form, which you can also put in here. Although, that's an orange flavor, isn't it?

Q: Yes. (inaudible)

(laughter)

Q: (inaudible)

GUERRERO: Not it'll take a little bit longer, because you are dealing with a more degenerative state condition. So you are dealing with a vibrational frequency that now may be five.

Q: OK.

GUERRERO: As opposed to somebody who just doesn't have enough energy -- maybe resonating at 25. So, for example, the guy who's drunk in the afternoon, after his lunch, because he ate complex carbohydrates, and now is pooped out tired. He's insulin resistant. His body's not metabolizing insulin effectively. And so, what the greens do is that

they simply open up this cell. It's like having your cell -- it looks like a glass bubble. And the nutrients can't penetrate through it. What the greens do with the MSN is that it makes that cell wall permeable, and it makes like a soap bubble. And so then, the cell can metabolize the insulin that's being secreted, and the guy's got energy, and he's going to find that he's not falling asleep at his computer any more. OK? And so, that'll happen that fast. So, they'll notice energy spurts within days. But a cancer patient, or someone that has a chronic degenerative condition? You usually start to see changes within 10 to 14 days.

Q: (inaudible)

GUERRERO: Well, in someone that -- let's say that you have an esophageal cancer, or where they get that acid reflux? That would be gone. They wouldn't experience the acid reflux. We can neutralize the acids that fast. Or, let's say that we've got somebody who is on chemotherapy, for example. You know, the ginger root powder will certainly keep them from being nauseous. It'll give them energy, and it will provide their cell with nourishment that the chemotherapy is depleting.

Q: (inaudible)

GUERRERO: We've got -- I've got in the powder I have 2,500

milligrams per scoop.

Q: (inaudible)

GUERRERO: Ah, no. Your advanced use would probably be a teaspoon - -6 to 12 times a day, as opposed to someone with arthritis is taking, you know, one teaspoon three times a day.

Q: (inaudible)

GUERRERO: Well, I would say that your - -any degenerative condition. So you would say fibromyalgia, lupus, rheumatoid arthritis. Not necessarily osteoarthritis, but rheumatoid arthritis. Cancer in any stage, in any form. Those are going to be your advanced use.

Q: (inaudible)

GUERRERO: You can base it on a pH test. And that's another very good question. Because, obviously, you know if they're maintaining high levels of alkalinity.

Q: A lot of people don't know how to test their pH properly.

GUERRERO: OK, how you test your pH - -now your pH strips that you sell here -- are they saliva pH strips? Or, urine pH strips?

Q: Saliva.

GUERRERO: OK. So, Saliva pH strips - -you want to instruct your clients that they need to test two hours after eating. OK? If they test within that period of eating, they won't get a

positive --they won't get the correct reading. So, they need to test two hours after they have eaten, or prior to eating. And, also do your pH strips come with a scale?

Q: (inaudible)

GUERRERO: Because, OK. So, as long as you -- yeah, they have that scale where they know where their pH value should be throughout that period of time in the day --if they test two hours after they eat, they'll get a correct reading.

Q: (inaudible)

GUERRERO: Yeah. You would. So, yeah, you would test them prior to eating, or two hours after eating.

Q: (inaudible)

GUERRERO: Five years.

Q: Five years? (inaudible)

GUERRERO: No, I've been here.

Q: (inaudible)

GUERRERO: It's not in the stores. Well, we distributed it through multi-level companies.

Q: (inaudible)

GUERRERO: I've never done an Infomercial -- this is my first time. (laughter)

Q: Well, you talked about (inaudible)

GUERRERO: Mm hmm.

Q: (inaudible)

GUERRERO: I have a lot of athletes that are on it.

Q: (inaudible)

GUERRERO: I agree. And yes.

(laughter)

GUERRERO: I will provide you with some of those. There's only a couple of athletes. And Oscar de la Hoya is a patient of mine, for example. But he can't give me any written testimony, because he sponsors -- you know, he endorses Metrix. So it just depends. But, Willie McGuinness? He takes it. Troy Brown takes it. Lawyer Milloy takes it. You can't Lawyer to take anything.

(laughter)

GUERRERO: So --

Q: What's the percentage of people that know about this
(inaudible)

GUERRERO: That's a good question. I don't know.

Q: (inaudible)

GUERRERO: Oh, I certainly would.

Q: Oh, I think the Infomercial is going to be a good point. But, (inaudible) now that customer base is 40-plus. And in (inaudible) but it doesn't have some of the benefits that this product does. So a lot of people who have been taking (inaudible) calcium -- (inaudible) they're going to basically discover that (inaudible) nutritional program.

Q: (inaudible)

GUERRERO: OH, I would. I mean, and like I said -- in my clinical practice -- in my clinical practice, my base protocol for everybody is the greens, and the coral calcium.

Q: (inaudible)

GUERRERO: Yeah, but they're the same things. That's why I was confused, because the tea-bags are the coral calcium, right?

Q: Right. (inaudible) delivery to them.

Q: (inaudible)

GUERRERO: You can't.

Q: It's very, very hard.

GUERRERO: It would be very difficult to become too alkaline.

Q: Very, very hard.

GUERRERO: OK? Yeah, I have -- and in all the years that I've been practicing, I've only seen it one time. And then, you know, obviously that will take you into a coma. But the reason why is because, for example -- remember we talked about positive ions? Creating an acidic balance? Well, these lights are unit-positive ions. Your computers emit positive ions. Cell phones emit positive ions. The sun emits positive ions. So, when you have all those -- and those ions, by the way, never fade. It's like you

know, when you drop a rock in the water, and the ripples go out? The ripples don't end at the shore. Those ripples are endless. That energy goes on forever. The same thing with your microwaves, cell phones, TV's, lights, computers. So there's no way, (laughter) in today's day and age? With 44,000 petro chemicals released in our air every year? There's no way we're going to be getting enough negative ions.

Q: I have got one (inaudible)

(laughter)

GUERRERO: I have no idea. I saw them when they were already there. So I have to bring in more acid, too. And actually, you end up becoming too alkaline like that when you are too acidic. So they're acid base drops so far that their alkaline reserves, in order to protect them, just shot right up to 14. And that's what threw him into a coma.

Q: (inaudible) How would you respond to that?

GUERRERO: I would say that you absolutely need both of them.

Absolutely. Because -

Q: (inaudible)

GUERRERO: Well, in the calcium, all they're getting is calcium magnesium.

Q: Yes.

GUERRERO: That's all they're getting. OK?

Q: (inaudible)

GUERRERO: But well, the trace minerals are completely different thing. OK? The trace minerals are not vitamins, OK? The trace minerals are not even your essential minerals. They're trace minerals which is that your body metabolizes them totally different.

Q: (inaudible)

GUERRERO: Oh, absolutely, will compliment the calcium.

Q: It's a perfect combination.

Q: Right.

Q: I mean, it could almost take the place of a multi-vitamin.

GUERRERO: For example -- if the --

Q: (inaudible)

GUERRERO: If the cell is -- if the cell is nourished, you have energy and you're going. OK? Coral Calcium does not provide your cell with the nutrient content that it needs to supply a cell for hours. And try it. Try living on Coral Calcium for three days. You won't make it.

Q: (inaudible)

GUERRERO: No, they're good -- they definitely need the calcium. No question. Because the body -- your blood pH is 7.365. OK? So, it needs to maintain that all the time, regardless. So if it becomes too acidic, it is going to

leech those minerals out. It is going to start leeching calcium, because calcium acts as a buffer. So they absolutely have to have the calcium. No question there. OK? They're just not getting all the fido-nutrients from, you know, the food that they're eating. And the foods are where you are going to get the amino acids, and you know, Calcium doesn't provide you with amino acids, and the calcium doesn't provide you with protein. There are four minerals that the body needs to maintain its stable. Without those four in balance, I don't care which one you have. If you don't have sodium, potassium, calcium and magnesium in a balance - -you can take Coral Calcium all day long. And if your sodium potassium levels are off, you are not going to absorb boo. So, you need those other nutrients. You need the sodium. You need the potassium in order to get greater absorption of the Coral Calcium.

Q: (inaudible)

GUERRERO: It can act as a replacement. We have several people. Actually, we use it for weight loss. We had a woman who will be calling in - -yes, she lost 80 pounds in seven months. And so we have that all the time. It's great for people that are diabetic.

Q: (inaudible)

GUERRERO: It actually, what it does, is that it does, because it

allows the cell again, remember to metabolize instantly.

There's four things that a red blood cell needs. It needs oxygen, iron, insulin and nutrients. And so, it'll just allow the cell to absorb, you know, metabolize insulin more effectively, because it doesn't have that mucosal barrier around it any more.

]Q: (inaudible)

GUERRERO: That's a little more difficult because we are dealing with an organ system that never worked. Type I Diabetes - - I've gotten people that are Type I Diabetics off of insulin in 36 months. You know ,that's three years of just a rigid protocol. Type II Diabetes, I can have them off of insulin-dependent Type II diabetics. We can have them off of insulin in 18 months. And people that are on Gluophage, Gliberide, Glucatrol - -we can have them off of those pills, and instant stable in ten days. Question?

Q: (inaudible)

GUERRERO: That's a good question. I mean, I certainly can find out where there are Mycrosposis in your area.

Q: One of the things that I wanted you to mention, the study that you did with the terminal patient. (inaudible)

GUERRERO: The study I did was at St. Joseph's hospital -- St. Joseph's Memorial Hospital, where they were, they had received a million dollar grant to do some research on

alternative medicine, as it related to degenerative disease. And I submitted the paper on acid alkaline balance, and they accepted it. And so we went there, and they gave us 200 terminally ill that had been diagnosed as having, you know, 18 weeks, or less to live. And so, they had already exhausted conventional care. And so, they were just looking to see --and, looking back now, I think the hospital just wanted the million bucks, and were hoping these people would die in 18 days. Or 18 weeks. But what had happened was that as we started to alkalize them, put them on, and change their diet --and we took them off of fruit. We didn't let them have any fruit. Nothing that was acid-forming in any way. Out of the 200 that we treated over a five-year period of time, we lost eight. And so what happened, at that point was -- and Cedar Sinai asked me to come and do, you know, a conference there. And talk about, you know, our research and our findings. When I went there to talk about our research and our findings, they just --they blew me out of the water. Because what we didn't do in that study was that we didn't conduct a double-blind control study. In other words, I didn't decide on who would get treatment, and who wouldn't. And it certainly was never my idea going into it. And it certainly isn't the principles of alternative medicine

anyway. And so, because I didn't have a group that I didn't do this with, they threw my study out. And they kicked us out of the hospital and --

Q: (inaudible)

(laughter)

GUERRERO: So anyway, but that's how that worked out.

___: Well, great. Let's give him a round of Applause.

GUERRERO: Thanks.

(Applause)

___: Thanks again to everybody for coming.